PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/902, 762

		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS						•	Γ	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS) minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		*			X40=		OR	X80=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" i			olumn 2	L	TOTAL		OR	TOTAL	
	C	LAIMS AS A	MENDED - PART II								OTHER THAN	
(Column 1)			(Colum					SMALL ENTITY		OR	OR SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CLAIM	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
							 A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)						.,,,
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	5 01 4 114	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	DETIPLE DEI	PENDEN	CLAIM		J	+135=		OR	+270=	
							L	TOTAL		OR	TOTAL	
		(Column 1)		(Colum	mn 2)	(Column 3)		DDIT. FEE		I - · •	ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	:	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		= '		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	11	X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ├			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pai					er foun	d in the app	ropriate box	in col	umn 1.	